



Bradford County
Building, Zoning & Planning
945-F North Temple Ave.
Starke, FL 32091
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Applicant is Proposing

_____ **Change in Occupant Without Renovation or a Name Change**

_____ **Change in Occupant and Change in Use**

_____ **Change in Occupant with Renovation or Interior Remodel**

Definitions

1. **Change in Occupant with No Renovation:** The occupant is changing the owner/ tenant to a new owner/tenant but without doing any Renovations to the interior or exterior of the property. The Business and Use stay the SAME. a.k.a Name Change.
2. **Change in Occupant with Renovation:** This is where the occupant is being originally developed or changing owners and interior renovations are required. The business and Use stay the SAME.
3. **Change in Use:** This occurs where the use of the property is changed from one business to another whereby the new business is similar or more intense of use than previously occupied the property or structure. (e.g Day Care to Restaurant). A change in use will be evaluated and a Determination of Development Review will be provided by the Zoning Director.

Applicant Information

Name _____ Address _____

City _____ State _____ Zip Code _____

Phone Number _____ Email Address _____

Parcel/Business Information

Business Name _____ Address _____ City _____

State _____ Zip Code _____ Parcel Number _____

Previous Business Name _____ Electric Meter # _____

Describe New Business

Directions

Owner /Applicant Affirmation

I hereby affirm that I am either the owner or the legal lease holder of the aforementioned property and that i will be occupying a newly developed or existing commercial development with the same use or a similar use as determined by the Bradford County Building & Zoning Department or that I affirm that i am changing or expanding the use and or improving the exterior of the site and am subject to development review requirements set forth in the Bradford County Land Development Regulations. I hereby affirm that the information provided is true and correct. I affirm that if I occupy the space with or without renovation that additional permitting is required and I understand that as a result of plan review, permit issuance and subsequent inspections that if it is determined that the proposal is not consistent with the information as provided, this application shall be considered Null & Void . I hereby affirm that approval of this application does not constitute approval for any other permit that may be required by the County or other agency having jurisdiction. I understand that this application is not an Occupational/Business License Application.

By:_____Print Name_____Date_____

Witness Signature_____Print Name_____

Official Use Only

Zoning_____Land Use_____Certificate #_____

Zoning Approval_____Print Name_____

Date_____Comments_____

For Change In Use

Type of Development Review Required

- ☐ Minor Development
- ☐ Major Development
- ☐ Re-Occupation With Renovation
- ☐ Site Modification
- ☐ None

Approved By_____Title_____Date_____

Comments_____
